PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10749929

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE C			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			28					RATE	FEE	1	RATE	FEE	
FOR .			NUMBER FILED		NUMBER EXTRA		·	BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			28 minus 20=		. 8			X\$ 9=		OR	X\$18=	144-00	
INDEPENDENT CLAIMS			€ minus 3 =		* 2			X43=		OR	X86=	172.00	
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT	•	·		,	+145=		OR	+290=	A	
* If the difference in column 1 is less than zero, enter						olumn 2	i	TOTAL		OR	TOTAL	1086 00	
CLAIMS AS AMENDED - PART II										,	OTHER	THAN	
,	<u> </u>	(Column 1)	·	(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A	5/9/7	CLAIMS REMAINING . AFTER AMENDMENT	·	HIGHI NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 28	Minus	·· 28		=		X\$ 9=		OR	X\$18=		
AME	Independent	. 5	Minus	*** 3	01 4114	= .		X43=		OR	X86=		
1. 9. 20. 23. 26.								+145=		OR	+290=		
7. 4. 20. 25 1								TOTAL		OR	TOTAL		
(Column 1) (Column 2) (Column 3)								ADDIT. FEE			ADDIT. FEE		
		CLAIMS HIGH			(Column 3)	1 r		ADDI-	1		ADDI-		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	USLY	PRESENT EXTRA		RATE	TIONAL: FEE	,	RATE	TIONAL FEE	
NON	Total	*	Minus	**		£		X\$ 9=		OR	. X\$18=		
AME	Independent	<u></u>		01.444] = <u>.</u>		X43=		OR	X86=	·		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
								TOTAL ADDIT. FEE			TOTAL ADDIT. FEE	<u> </u>	
(Column 1) (Column 2) (Column 3)								NODII. FEE			ADDII. 1 CC		
AMENDMENTC		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHI NUME PREVIO PAID I	BER JUSLY	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
S S	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	* '	Minus	***		=		X43=		OR	X86=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
11	the "Highest Nur	nber Previously Pa	id For" IN THIS	S SPACE is	less that	n 20, enter "20."	- A	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT FEE		
		nber Previously Pa ber Previously Paid					r foui	nd in the app	ropriate box	in col	umn 1.		